

## PERMISSION SLIP-PARKS AND RECREATION DEPARTMENT MCQUEEN PARK ACTIVITY CENTER CLIMBING WALL

First Name:

Child's Last Name:		First Name:			
DOB:	Age:	Grade level:	Gender:	$\square$ M	☐ F (check box)
Address:		City:		Zip:	
Parent/Guardian:		Phone (H):	Cell: _		
Does this participant have any special ne	eds (physical limitations)?:				
Please list health restrictions (if any):					
Allergies:	P	Medication currently taking:			
Primary Care Physician:		F	Phone:		
Emergency Contact:			Phone:		
<b>NOTE:</b> When minor accidents occur it is our parent/guardian but also to activate Emergen	•	ent/guardian. When a serious acci	dent occurs, our policy is r	not only to	contact the child's
Assumption of Risk & Release of All Claims I allow my child and myself to participate in Gilbert limited to any climbing wall or equipment on site. I and my own participation in programs and activities risks involved with physical exertion and use of reprograms/activities. I also give my permission for a including the promotion of Town events on the Tow the photographs, audio or video recordings used. I used. I am at least 18 years of age, and verify that a and address is grounds for removal from the program	release the Town of Gilbert and its and use of recreation facilities. I us creation facilities, including serion ny photographs, audio or video re n's website or the Town's social m further waive any and all right to Il information provided at registrat	s employees of any liability, claims or or onderstand that the Town of Gilbert has use injury. I certify that my child's an ecordings taken of my child and/or my edia sites. I further waive any and all r privacy, compensation, or the right to tion or on this form is correct. Providing	demands, which we may have no medical insurance for my of d my own physical condition realf to be used by the Town ight to privacy, compensation inspect or approve the photo g incorrect information include	hereafter child or me are satisfa of Gilbert , or the righ ographs, au	as a result of my child's I understand there are actory to participate in for any lawful purpose, at to inspect or approve dio or video recordings
Parent or Legal Guardian Signa	ture		Date		

# MCQUEEN PARK ACTIVITY CENTER CLIMBING WALL **Climbing Wall Rules and Supervisor Guidelines**

Climbing Wall Rules will include, but will not be limited to the following rules: (Failure to adhere to instructions will result in not being allowed to climb).

#### **Before Climb:**

- Supervision is required.
- 6' protective mat must be in place.
- Remove all jewelry.
- Sneakers are required for climbing.

#### **During Climb:**

- Climb safely.
- Traverse climbers will stay below the red safety line which indicates the maximum height of the free climb zone. No feet above the Red Line.
- Maintain at least 3 points of contact with the wall at all times.
- Step down from the wall.
- No jumping.
- No climbing around, over or under another child.
- Have fun!

### **After Climb:**

Step away from the mat upon completion of your climb. No jumping.

(one form/child)

- Do not walk underneath climbers on the wall.
- Report any damaged equipment to the wall supervisor.

#### **Supervisor Guidelines:**

- Only trained personnel will supervise the use of the Climbing Wall. Climbers should be supervised at all
- The supervisor is responsible for the safe operation of climbing wall.
- Regularly inspect climbing wall, its components and protective surfacing to ensure they are in good condition.
- Mat Locking System will be used to prevent unauthorized/unsupervised after-hour usage.